

....

Attorney Docket No.: 00597/0200639-US0

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. in an envelope addressed to:

EV834732315-US

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on	October 13, 2006						
	Date						

	ech
D /3/P	ure
Typed or printed name of p	erson signing Certificate
Registration Number, if applicable	Telephone Number

regionation ranibor, ii applicable

relephone Number

Note:

Each paper must have its own certificate of mailing, or this certificate must identify

each submitted paper.

Fee Transmittal (1 page)

Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1

page)

Amendment Transmittal (1 page)

Amendment in Response to Non-Final Office Action (7 pages)

Check in the amount of \$600.00

Return Receipt Postcard

AME 10/735,181-C	Docket No. 00597/0200639-L					
TRANSIC atio	n No.	Filing	1	Examiner		
10/735,181-Co		December	12, 2003	L. K. Bui	372	
	CINE WRAPPIN PING BAG	IG MACHINE,	MEDICINE V	VRAPPING SHEET	, AND DIVIDED	
		THE COMMI	SSIONER FO	OR PATENTS		
Transmitted here						
The fee has been						
			S AS AMENI			
	Claims Remaining After Amendment	Highest Number Previously	Number Extra Claims	Rate	-	
Total Claims	32	Paid - 29 =	Present 3	x 50.00	150.00	
Independent	3	- 3 =	0	x 200.00	0.00	
Claims Multiple Depend	1					
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:		600.00	
TOTAL ADDIT				Small Entity		
x Large Entity	•					
x Large Entity	al fee is require	d for this amer	ndment.			
x Large Entity No additions	al fee is require			n the amount of \$		
x Large Entity No additional		count No)4-0100 ir	n the amount of \$_		
x Large Entity No additional	al fee is require ge Deposit Acc copy of this she	count No(eet is enclosed)4-0100 ir	n the amount of \$ _ the filing fee is enc	losed.	
x Large Entity No additiona Please char A duplicate X A check in the	al fee is require ge Deposit Acc copy of this she	count No0 eet is enclosed 600.00	04-0100 ir l. to cover	-	losed.	
x Large Entity No additional Please char A duplicate x A check in the Payment by x The Director	al fee is require ge Deposit Acc copy of this she he amount of \$ credit card. Fo	eount No0 eet is enclosed 600.00 orm PTO-2038 norized to char	to cover is attached.	the filing fee is enc		
x Large Entity No additional Please char A duplicate x A check in the Payment by x The Director as described	al fee is require ge Deposit Acc copy of this she he amount of \$ credit card. For	eet is enclosed 600.00 orm PTO-2038 norized to charolicate copy of	to cover is attached.	the filing fee is enc		
X Large Entity No additional Please char A duplicate X A check in the Payment by X The Director as described X Credit a	al fee is require ge Deposit Acc copy of this she he amount of \$ credit card. For r is hereby auth d below. A dup ny overpaymer	eet is enclosed 600.00 orm PTO-2038 norized to charalicate copy of	to cover is attached. ge and credit this sheet is e	the filing fee is enc	o. <u>04-0100</u>	
X Large Entity No additional Please char A duplicate X A check in the Payment by X The Director as described X Credit a	al fee is require ge Deposit Acc copy of this she he amount of \$ credit card. For r is hereby auth d below. A dup ny overpaymer	eet is enclosed 600.00 orm PTO-2038 norized to charalicate copy of	to cover is attached. ge and credit this sheet is e	the filing fee is enc Deposit Account N enclosed.	o. <u>04-0100</u> 37 CFR 1.16 and 1.1	
X Large Entity No additional Please char A duplicate X A check in the Payment by X The Director as described X Credit a	ge Deposit Accopy of this she he amount of \$ credit card. For is hereby author displayment any additional fill er	eet is enclosed 600.00 orm PTO-2038 norized to charalicate copy of the copy o	to cover is attached. ge and credit this sheet is e	the filing fee is enc Deposit Account N enclosed.	o. <u>04-0100</u>	

PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
The Paperwork Societion Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

TRADEffective on 12/08/2004.				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005				Application Number 10/735,181-Conf. #2581					
				Filing Date		December 12, 2003			
				First Named Inv	entor	Yasutoshi Nishimura			
F0FF1 2005				Examiner Name		L. K. Bui			
Applicant claims small entity status. See 37 CFR 1.27					Art Unit		3728		
TOTAL AMOUNT OF PAYMENT (\$) 600.00				Attomey Docket No. 00597/0200639-US0					
METHOD OF PAYMENT (check all that apply)									
X Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.									
For the	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
c	harge fee(s) indicat	ed below			Charge	e fee(s) inc	dicated below, ex	cept for th	e filing fee
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCU	LATION		·						
1. BASIC FILIN	G, SEARCH, AND	EXAMINA	TION FEES	3			·		
	1	FILING F		SEA	ARCH FEES	EXAMIN	IATION FEES		
Application T	ype Fee		III Entity ee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	30	0 -	150	500	250	200	100		
Design	20	0	100	100	50	130	65		
Plant	20	0	100	300	150	160	80		
Reissue	30	0	150	500	250	600	300		
Provisional	20	0	100	0	0	0	0		
2. EXCESS CL	AIM FEES			•				-	Small Entity
Fee Description								Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues) 50 25									
_	ent claim over 3 (in	cluding Re	eissues)					200	100
Multiple depend								360	180
Total Claims Extra Claims Fee (\$) Fee F				7aid (\$) 0.00	Multiple Dependent Claims Fee (\$) Fee Paid (\$)			,	
	- 29 = 3 iber of total claims paid	x <u>50.00</u>		13	3.00	<u>re</u>	e (\$)	ee Paiu (\$	¹
Indep. Claims	Extra Claims	Fee (_	Fee P	aid (\$)	-			-
	-3 = 0	× 200.0			00				
	ber of independent clair	ns paid for, it	f greater than	3.		•			
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								'aid (\$)	
	- 100 =	/50			(round up to a who	le number)	x =	·	
4. OTHER FEE	• •							Fees	Paid (\$)
•	Specification, \$1	•		•	•	_			
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00									
SUBMITTED BY									
Signature	men	92	<u>~~</u>		Registration No. (Attorney/Agent)	26,272	Telephone	(212) 527	′-7717
Name (Print/Type)	Melvin C. Garne	er					Date (October 1	3, 2006